

CITY OF SAINT LOUIS  
MISCELLANEOUS LICENSE APPLICATIONLICENSE TYPE  
**L421422**  
HOTEL/MOTELDISTRICT  
SUB DISTRICTFOR LICENSE YEAR BEGINNING: FEB 1, \_\_\_\_\_  
MUST FILE AND PAY BEFORE: FEB 1, \_\_\_\_\_

## ITEMS 1 THROUGH 12 MUST BE COMPLETED

1. TRADE NAME

5. FEDERAL ID/SS NO.

2. TRUE NAME

6. BUSINESS PHONE

3. STRUCTURE  
ADDRESS

7. FAX NUMBER

4. MAIL TO:

8. SALES/USE TAX NO.

OWNER ☐

9. TYPE ORGANIZATION IND PTN CORP

HDQTRS ☐10. DATE BUSINESS STARTED  
IN ST. LOUIS CITYSTRUCTURE ☐

11. BUSINESS TYPE

**6260****HOTELS AND MOTELS**

12. NO. OF EMPLOYEES

Businesses that do not file and pay before June 1 will be subject to CLOSURE for operating without a License.

THIS SPACE  
PROVIDED TO  
CORRECT ABOVE  
LINE ITEMSMAIL TO  
ADDRESS ISOWNER ☐HDQTRS ☐STRUCTURE ☐

1. TRADE NAME

2. TRUE NAME

3. STRUCTURE  
ADDRESS4. MAIL TO:  
NAME  
AND  
ADDRESS

5. FEDERAL ID/SS NO.

6. BUSINESS PHONE

7. FAX NUMBER

8. SALES/USE TAX NO.

9. TYPE ORGANIZATION

10. DATE BUSINESS STARTED

11. BUSINESS TYPE

12. NO. OF EMPLOYEES

REPORTED BY TAXPAYER

NUMBER OF ROOMS	
MULTIPLY BY \$1.50	X 1.50
TAX DUE	
PENALTIES DUE	
<b>TOTAL DUE – PAY WITH RETURN</b>	

ET	PET	PPT	OCC	WC	SST	SIGN	BAL
OTHER	PRIOR	POLICE	CONT	ID	CREDIT		CHK

LICENSE #

LIC. APPROVED \_\_\_\_\_

MAKE CHECKS PAYABLE TO:

**Mavis T. Thompson, Esq.**  
License Collector  
1200 Market Street Room 102  
Saint Louis, MO 63103-2804I HEREBY CERTIFY AS PROVIDED BY LAW THAT THE FOREGOING IS A TRUE  
STATEMENT. I FURTHER CERTIFY THAT THIS APPLICANT HAS PAID ALL REAL ESTATE  
TAXES, PERSONAL PROPERTY TAXES, EARNINGS TAXES, LICENSE TAXES, PERMITS  
AND CERTIFICATE FEES DUE AND PAYABLE TO THE CITY OF SAINT LOUIS AND THE  
STATE OF MISSOURI.

(PRINT NAME AS SIGNED)

(SIGNATURE OF OFFICER, OWNER OR AUTHORIZED PERSON)

**SEE INSTRUCTIONS ON BACK**  
**PAYMENT REQUIRED WITH APPLICATION**